

Construction Contractor's Capability Statement

The undersigned certifies that the information provided herein is true and sufficiently complete so as not to be misleading.

COMPANY NAME

Beatv Electrical Inc.

ADDRESS

PO Box 4496

CITY

Santa Fe

STATE

NM

ZIP CODE

87502

PHONE

505-982-5556

FAX

505-982-5558

EMAIL:

beatyelect@aol.com

PRIMARY CONTACT:

Tom Beaty

TYPE OF CONSTRUCTION WORK (Check all that apply)

☒ X General---List Primary Expertise:

☒ Site Work

☐ Structural

☐ Carpet

☐ Mechanical

☒ Demolition

☐ Steel Fencing

☐ Roofing

☐ Clean Room

☒ Exterior Utilities

☐ Masonry

☐ Building

☐ Fire Protection

☐ Paint

☐ Mechanical (HVAC/Plumbing)

☒ Electrical

☐ Nuclear Facility

COMPANY PROFILE:

How many years has your organization been in a business as a construction contractor?

38

How many years has your organization been in the construction business under its present business name?

38

Under what former names has your organization operated?

N/A

List the names and titles of the key individuals of your organization, years with firm, educational training and qualifications.

OTIS L. Beaty - CEO

Thomas E. Beaty - President

Erika Thomas – Office Manager

List the categories of work that your organization normally performs with its company personal.

Commercial & Industrial Electrical
Site Utilities – Duct Banks – Primary and Secondary Power

List the major projects your organization has in progress or has completed in the past five years, owner, contact amount, date/expected completion, percentage performed with its company personal

Tritium Science Engineering – LANL - \$698,000.00 10/01 - 98%
TA-53 – Cooling Tower – LANL - \$300,000.00 – 8/00 - 98% - 2 sites
TA-53 – Radio Active Liquid Waste - \$320,000.00 – 5/98 - 98%
Whole Foods – Whole Goods Inc. - \$200,000.00 – 9/00 - 98%

List your Trade References

Graybar Electric
Rexell Electric
DAHL Electric

List your Surety company or your banking affiliates.

Century Bank - CNA

What is your organization's current bonding rate?

Single 1% Aggregate _____

Has your firm entered into a contract that had to be completed by your surety within the past five years?

Yes ☐ No ☒ x

List your Contractor's New Mexico license classification(s):

EE98, EE01, GB98

Safety History:

List your firm's: Workmen's compensation Experience Modification Rate (EMR), Total recordable Injury/Illness case rate, and Lost workday case rate for the current period (calendar year to-date) and the previous three year period.

1999 - .74 2000 - .78 3 Year Average - .77

Lost Workday 1999 – 2 2000 – 0 2001 – 2 Avg. 4

Rate Type: Interstate .77, In-State _____, Monopolistic _____

Insurance Carrier:

Daniel's Insurance

What is your firm's North American Industrial Classification System (NAICS) code?

Unknown

Check all that apply to your organization. Provide certification if 8(a) Certified or Small Disadvantaged.

☐ Woman owned ☒ Small Business ☐ Small Disadvantaged ☐ 8(a) ☐ Large ☐ Veteran
☐ Disabled Veteran ☐ HUBZone

Present number of employees

☒ 1-20 ☐ 21-40 ☐ 41- 60 ☐ 61 – 100 ☐ Over 100